



PUBLIC HEALTH COMMITTEE  
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Testimony IN SUPPORT of GOVERNERS BILL 36, AN ACT CONCERNING THE GOVERNOR'S RECOMMENDATIONS TO IMPROVE ACCESS TO HEALTH CARE.

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February 25, 2014

Honorable Chairs and Members of the Public Health Committee:

Thank you for the opportunity to present testimony regarding Bill 36. My name is Karen Myrick. I am a family nurse practitioner, a Professor at Quinnipiac University, and a member of the Connecticut APRN Society's Government Relations Committee. I ask that you support this bill.

As a Nurse Practitioner for 15 years, I have attempted to create a practice that would fulfill an identified state health care need, improve patient time to treatment and significantly improve access to care. At this time, an athlete with an injury may need to wait more than a month to be seen. This wait time is increased for a patient with Medicaid. Providers may have limitations that management impose on scheduling patients with Medicaid. These limitations range from not accepting patients with Medicaid, to seeing only 2 a day. With such a limited access to care, patients are at risk for complications that could be avoided.

Realizing a limited access and a health care need, I contacted more than 20 orthopedic and sports medicine physicians so that I could open a clinic for patients with Medicaid or from low-income families, who sustained a sports medicine injury. Not one would sign a collaborative agreement for this endeavor.

The mandatory "collaborative" agreement is often posed as a scope of practice matter. The riddance of this agreement would not change my APRN practice, yet would allow access to care for a population where a significant need has been identified.

Please support Bill 36 to eliminate an impractical barrier that fulfills no public health policy purpose, but does provide a barrier to accessing appropriate health care.

Thank you,

Karen M. Myrick, DNP, APRN